

**UNITED STATES DISTRICT COURT**  
**District of Minnesota**  
NOTICE OF APPEAL

USCA 8 NO \_\_\_\_\_

United States of America

Plaintiff

vs

Defendant

\_\_\_\_\_  
District Court Docket Number

\_\_\_\_\_  
District Court Judge

Notice is given that \_\_\_\_\_ appeals to the United States Court of Appeals  
for the Eighth Circuit from the **9** Judgment & Commitment **9** Order (Specify)  
entered in this action on \_\_\_\_\_

Signature of Defendant's Counsel

Typed name of Defendant's Counsel

( )

Street Address/Room Number

Telephone Number

City

State

Zip

Date

**TRANSCRIPT ORDER FORM**  
**TO BE COMPLETED BY ATTORNEY FOR APPELLANT**

**9** Please Prepare a transcript of:

**9** Pre-trial proceedings

**9** Testimony or

**9** Portions thereof \_\_\_\_\_

**9** Sentencing

**9** Post Trial Proceedings

**9** Other (Specify) \_\_\_\_\_

**9** I am not ordering a transcript because

**9** Previously filed

**9** Other (Specify) \_\_\_\_\_

**CERTIFICATE OF COMPLIANCE**

Appellant hereby certifies that copies of this notice of appeal/transcript order form have been filed/served upon US District Court, court reporter and all counsel of record, and that satisfactory arrangements for payment of costs of transcripts ordered have been made with the court reporter. (FRAP 10(b)). Method of payment  
\_\_\_\_\_ Funds, \_\_\_\_\_ CJA Form 24 completed

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

**NOTE: Complete All Items on Reverse Side**

**INFORMATION SHEET**  
**TO BE COMPLETED BY ATTORNEY FOR APPELLANT**

1. Defendant's Address : \_\_\_\_\_  
\_\_\_\_\_
2. Date of Sentence: \_\_\_\_\_ **9** Jury **9** Non-Jury  
Offenses: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
Trial Testimony - Number of days \_\_\_\_\_ Bail Status: \_\_\_\_\_
3. Sentence and Date Imposed: \_\_\_\_\_  
\_\_\_\_\_
4. Appealing: Sentence **9** Conviction **9** Both **9**  
Challenging: **9** Application of Sentencing Guidelines  
**9** Constitutionality of Guidelines  
**9** Both Application and Constitutionality
5. Date Trial Transcript ordered by Counsel or District Court: \_\_\_\_\_  
Stenographer in Charge : \_\_\_\_\_  
(Name, Address, Phone) \_\_\_\_\_  
\_\_\_\_\_
6. Trial Counsel Was: **9** Appointed (no fee required) **9** Retained (filing fee \$105 unless IFP granted)  
Does Defendant's financial status warrant appointment of counsel on appeal?  
**9** Yes **9** No  
Affidavit of Financial Status filed: \_\_\_\_\_  
Is there any reason why trial counsel should not be appointed as counsel on appeal?  
**9** Yes **9** No
7. Assistant US Attorney Name and Phone Number: \_\_\_\_\_  
\_\_\_\_\_

**Court Reporter Acknowledgment**

\_\_\_\_\_  
Date Order Received

\_\_\_\_\_  
Estimated Completion Date

\_\_\_\_\_  
Est. Number of Pages

\_\_\_\_\_  
Court Reporter Signature

\_\_\_\_\_  
Date